## **FEC** FORM 3

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## REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

IF OCT 15 AM 9: 26

**FEC FORM 3** 

(Revised 02/2003)

	For All Authorized Committee				5 UC I drinke use only	
1. NAME OF COMMITTEE (in	TYPE OR PRI		ample: If typing, type er the lines.			
ED GILLESPII	E FOR SENATE		.1.1.1.1.1.4.4			
		1 1 1 1 1 1 1	1 1 1 1 1 1			
ADDRESS (number ar	PO BOX 715	96 		1 1 1 1 1 1 1		
Charle is all	«					
Check if direction than previous reported. (A	usiy I RICHMOND			VA 2325	<u> </u>	
	CATION NUMBER ▼	СПҮ▲	······································	STATE A	ZIP CODE A STATE ▼ DISTRICT	
C C005557		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	VA L.	
4. TYPE OF RE	PORT (Choose One)	1				
(a) Quarterly R		(b) 12-Day <b>PRE</b>	-Election Report for the	he:		
(a) <b>a</b> castony	oporto.		Primary (12P)	General (12G)	Runoff (12R)	
April 1	5 Quarterly Report (Q1)		Convention (12C)	Special (12S)		
July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)			Convention (120)	Opecial (120)	Special (123)	
		Election on	M M / D D	, <u> </u>	in the State of	
January 31 Year-End Report (YE)		(c) 30-Day <b>POS</b>	T-Election Report for	the:		
			General (30G)	Runoff (30R)	Special (30S)	
LO LD		Election on	M / D / D	)	in the State of	
CD CD LD LS. Covering Period	M → M / D → D O1	2015	through	09 / D / Y	2015 T	
Coertify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.						
CType or Print Name of Treasurer John G. Selph						
Ln cd Signature of Treasure	er <del>John G. Scipli</del>	f Tilely	25	Date 10 /	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
LO	false, erroneous, or incomp	) plete information may	subject the person sign	ning this Report to the pe	enalties of 2 U.S.C. 8437a	
Office	and, directodes, or mooning	acto intolliation may	Described and person sign	g the report to the pe		